24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Majority PAC	C C00484642
	G 000404042
Check if 24-hour report 48-hour report New report Amends report filed	on Mam / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Waterfront Strategies	03 / 15 / 2014
Mailing Address 3050 K St NW	Amount
Ste 100	04350.00
City State Zip Code Washington DC 20007-5108	94350.00 Transaction ID : VN7GB9RMJJ2 Date of Disbursement or Obligation
Purpose of Expenditure Media Buy Category/ Type	Mam / Dad / Yayayay
Name of Federal Candidate Support Office	e Sought: House District:
William Cassidy Oppose	President State: LA
Calendar Year-To-Date Per Election for Office Sought Disbut 2014	Ursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	Amount
	Amount
City State Zip Code	
Dumana of Funandihura	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	ursement For: Primary General
Tel Ziocitali loi Ciliad Sougrit	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	94350.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	94350.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
	03 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	